



# Youth in Transition Conference

## Registration Form

October 3-5, 2010



Helena, MT



Red Lion Colonial Inn

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Are you registering as: ☐ Individual  
☐ With a group

Please list group name:

**Note:** For a group registration, list the group contact below, and complete page three of the registration form with the names of the other group members.

**Cost:** Individual: \$50

Group rate: \$40 per person (for groups of more than 3 individuals who register together)

### Contact Information (for individual registration or group contact)

First Name:

Last Name:

Company/Organization (if applicable):

Address:

City, State, Zip:

Phone:

Fax:

Email:

Indicate your primary role: (please check one)

☐ Teacher

☐ Parent/Family Member

☐ Youth

☐ Service Provider

☐ Other:

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## Accommodations

If you require an alternative format not addressed below, please contact Carol Lawton at **Phone: 406-442-2576** or **Email: [mylfcaryl@bresnan.net](mailto:mylfcaryl@bresnan.net)**. Reasonable efforts will be made to accommodate you if your request is received by September 15, 2010.

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## Alternate Format Request

- |  |  |                                  |
|--|--|----------------------------------|
| <input type="checkbox"/> Sign Language Interpreter | <input type="checkbox"/> Compact Disc (CD) | <input type="checkbox"/> Braille |
| <input type="checkbox"/> Large Print               | <input type="checkbox"/> Other:            |                                  |
- 

## Registration Information

**Method of Payment:** Registration payments may be made out to *MYTransitions*

- |   |               |
|---|---------------|
| <input type="checkbox"/> Personal Check | Check Number: |
| <input type="checkbox"/> Purchase Order | PO Number:    |

**Cost:** Individual: \$50

Group rate: \$40 per person (for groups of more than 3)

**Number of registrants:**

**Total due/paid:**

**Please print this form and mail to: MYTransitions, 1617 Euclid Ave, Helena, MT 59601 or Email as an attachment to Carol Lawton at [mylfcaryl@bresnan.net](mailto:mylfcaryl@bresnan.net).**

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**Group Registration Information:** Please list all the names of the group members  
(these are *in addition* to the primary contact person listed on page 1)

<b><u>Name</u></b>	<b><u>Position</u></b> (student, parent, teacher, para, etc.)	<b><u>Alt. Format</u></b> (please list)
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- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.